	Co	nnectic	•							_			ction		
		Wat	ter Qual	lity M	onit	oring a	nd Com	plia	nce	Sch	edul	e			
PWS ID	PW	S Name						Classifi	cation	n Popu	ulation	Owi	ner Type	Pr	imary Source
CT1000044	NO	RTH CANAAN	CONGREGA	TIONAL (CHURC	Н		N	С	2	25		Р		GW
Local Addre	ess (where	e applicable)				Service	Resident	ial Co	mmer	rcial Ir	ndustria	al	Combin	ed	Agricultural
172 LOWER	ROAD					Connection	ns		1						
Towns Serv	ed: NOR	TH CANAAN					'								
				M	onit	oring Red	quireme	nts							
Water Syst	tem Faci	lity: DISTR	IBUTION SY	YSTEM (WSF I	D: 00600)									
Total Coli	form (3	100)									1	rou	itine (R	Г) р	er quarter
Sampl	ing Point	(Sampling Po	oint ID)				Monitorin	ng Perio	od	Collect	ion Per	riod	Com	plic	ince Status
Select	from Inv	entory of Acti	ve Sampling	Points			10/1/23 -	12/31/	23					Cor	nplete
							1/1/24 -	3/31/2	4						
							4/1/24 -	6/30/2	4						
							7/1/24 -	9/30/2	4						
Physical P											1	rou	itine (R	Γ) p	er quarter
_		(Sampling Po					Monitorir			Collect	tion Per	riod			ince Status
Select	from Inv	entory of Acti	ve Sampling	Points			10/1/23 -							Cor	nplete
							1/1/24 -								
							4/1/24 -								
							7/1/24 -	9/30/2	4						
Water Syst	tem Faci	lity: ENTRY	POINT (W	VSF ID: 0	0700)										
Nitrate Ar	nd Nitrit	e (NOX)										1	routine	(R	Γ) per year
-		(Sampling Po	oint ID)				Monitorin			Collect	ion Per	riod	Com	plic	ınce Status
ENTRY	POINT (3	3)					1/1/23 - 1							Cor	nplete
							1/1/24 - 1								
							1/1/25 - 1	2/31/2	25						
			Water Sy	ystem	Facili	ity and S	ampling	Point	t Inv	ento	ry				
Water										Total	Lead	and			
-	Water Sy	stem Facility			Point	Sampling P			C	oliform					Stage
Facility ID				ID		Description		Sta	tus	Rule	Rule	Tier	Asbest	05	WQP 2 DBPR
00600	DISTRIBU	TION SYSTEM		4			ON SYSTEM	P	A	Υ					
				DOWNST	REAM		ERVICE CON	P	A						
				UPSTRE	EAM	WITHIN 5 S	ERVICE CON	A	4						
00700 E	ENTRY PC	INT		3		ENTRY POI	VT	P	4						
21766 \	WELL			2		WELL		P	4						
						tact Info	rmation								
Name						rganization							Job Titl	e	
Ms. Wendy							Cong Churc	า			asurer				
Mailing Add		One		Mailing A	Addres	s Line Two				С	ity		State		Zip Code
P.O. Box 30						ı			Cana				СТ	C	6018-0306
Business I	Phone	Extension	Fax		Mobi	le Phone	Emergency	Phone	Emai	il Addre	SS				

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

wacsk@optonline.net

860-672-3487

Contact Role(s): Administrative Contact, Legal Contact

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

				1			
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1000044	NORTH CANAAN CONGREGATIONAL CHURCH	1		NC	25	Р	GW
Local Address (v	here applicable)	Service	Resider	ntial Commerci	al Industri	al Combine	ed Agricultural
172 LOWER ROA	AD	Connections		1			

Towns Served: NORTH CANAAN

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	dominocarda Dopar amoni	corrabile r	Carcii	2111111118	5 Tracer	Decement				
	Water Quality Mo	nitoring and	d Con	npliance	Schedul	e				
PWS ID	WS ID PWS Name Classification Population Owner Type Primary Source									
CT1000094	LONE OAK CAMPGROUND			NC	1,250	Р	GW			
Local Address (w	here applicable)	Service	Residen	tial Commerc	ial Industri	al Combine	ed Agricultural			
360 NORFOLK R	DAD	Connections	Connections							
Tavvina Camicadi N	IODTII CANAAN					•				

Connecticut Department of Public Health Drinking Water Section

360 NORFOLK ROAD		Connections		1			
Towns Served: NORTH CA	NAAN						
	Monito	oring Requ	irements	;			
Water System Facility:	DISTRIBUTION SYSTEM (WSF II	D: 00600)					
Total Coliform (3100)					2 r	outine (RT) p	er month
Sampling Point (Sam	pling Point ID)	ı	Monitoring P	Period	Collection Period	l Complian	ice Status
Select from Inventory	of Active Sampling Points		4/1/24 - 4/3	0/24			
			5/1/24 - 5/3	1/24			
			6/1/24 - 6/3	0/24			
			7/1/24 - 7/3	1/24			
			8/1/24 - 8/3	1/24			
			9/1/24 - 9/3	0/24			
		-	10/1/24 - 10/	31/24			
Physical Parameters (I	•				1 ro	utine (RT) pe	er quarter
Sampling Point (Sam	· · ·		Monitoring P	Period	Collection Period	l Complian	ice Status
Select from Inventory	of Active Sampling Points	-	10/1/23 - 12/		10/1-10/31		
			4/1/24 - 6/3				
			7/1/24 - 9/3	0/24			
Water System Facility:	ENTRY POINT WELL #1 & WELL	#2 (WSF ID:	00700)				
Nitrate And Nitrite (N	OX)				1	L routine (RT)	per year
Sampling Point (Sam	pling Point ID)	ı	Monitoring P	Period	Collection Period	l Complian	ice Status
ENTRY POINT WELL #	1 & WELL #2 (3)		1/1/23 - 12/3	31/23	4/1-10/31	Com	plete
			1/1/24 - 12/3	31/24	4/1-10/31		
			1/1/25 - 12/3	31/25	4/1-10/31		
Water System Facility:	ENTRY POINT WELL #3 (WSF ID	: 00701)					
Nitrate And Nitrite (N	OX)				1	L routine (RT)	per year
Sampling Point (Sam	pling Point ID)	ı	Monitoring P	Period	Collection Period	l Complian	ice Status
ENTRY POINT WELL #	3 (3)		1/1/23 - 12/3	31/23	4/1-10/31	Com	plete
			1/1/24 - 12/3	31/24	4/1-10/31		
			1/1/25 - 12/3	31/25	4/1-10/31		
Water System Facility:	ENTRY POINT- WELL #4 (WSF II	D: 00702)					
Nitrate And Nitrite (N	OX)				1	L routine (RT)	per year
Sampling Point (Sam	pling Point ID)	1	Monitoring P	Period	Collection Period	l Complian	ice Status
ENTRY POINT WELL #	4 (3)		1/1/23 - 12/3	31/23	4/1-10/31	Com	plete
			1/1/24 - 12/3	31/24	4/1-10/31		
			1/1/25 - 12/3	31/25	4/1-10/31		
Water System Facility:	WELL #1 (WSF ID: 21768)						
E. Coli (3014)					1 re	outine (RT) p	er month
Sampling Point (Sam	pling Point ID)	ı	Monitoring P	Period	Collection Period	l Complian	ice Status
WELL #1 (2)			4/1/24 - 4/3	0/24			
			5/1/24 - 5/3	1/24			
			6/1/24 - 6/3	0/24			
			7/1/24 - 7/3	1/24			
			8/1/24 - 8/3	1/24			

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut Departme				_		l
	Water Quality I	Monitoring and	d Comp	liance	Schedul	e	
PWS ID	PWS Name		Cla	assification	Population	Owner Type	Primary Source
CT1000094	LONE OAK CAMPGROUND			NC	1,250	Р	GW
-	where applicable)	Service	Residential	Commer	cial Industria	l Combin	ed Agricultural
360 NORFOLK R		Connections		1			
Towns Served: I	NORTH CANAAN						
		Monitoring Requ	iirement	S			
-	Facility: WELL #1 (WSF ID: 2176	58)					
E. Coli (3014)						-	RT) per month
Sampling I	Point (Sampling Point ID)		Monitoring		Collection Per	iod Com	pliance Status
			9/1/24 - 9/				
	- 11:		10/1/24 - 10)/31/24			
	Facility: WELL #2 (WSF ID: 2176	59)					
E. Coli (3014)						' - '	RT) per month
	Point (Sampling Point ID)		Monitoring		Collection Per	iod Com	pliance Status
WELL #2 (2	2)		4/1/24 - 4/				
			5/1/24 - 5/				
			6/1/24 - 6/				
			7/1/24 - 7/				
			8/1/24 - 8/				
			9/1/24 - 9/	-			
Mater Custom	Facility: WELL #2		10/1/24 - 10	7/31/24			
-	Facility: WELL #3	(WSF ID: 21770)) \
E. Coli (3014)			Monitorina	Daviad		' - '	RT) per month
	Point (Sampling Point ID)		Monitoring		Collection Per	ioa Com	pliance Status
WELL #3 (2	<u>-)</u>		4/1/24 - 4/. 5/1/24 - 5/.				
			6/1/24 - 6/				
			7/1/24 - 7/				
			8/1/24 - 8/				
			9/1/24 - 9/				
			10/1/24 - 10	-			
Water System	Facility: WELL #4 (WSF ID: 2177		10/1/24 10	731/24			
E. Coli (3014)		, - ,				L routing /F	RT) per month
-	Point (Sampling Point ID)		Monitoring	Period	Collection Per	-	pliance Status
WELL #4 (2			4/1/24 - 4/		<u>concention i ei</u>	iou com	phanec Status
***************************************	-1	-	5/1/24 - 5/				_
			6/1/24 - 6/				
			7/1/24 - 7/				
			8/1/24 - 8/				
			9/1/24 - 9/				
			10/1/24 - 10				
	Monthly Water Syster				g Requirer	nents	
	widiting water system	ir racinty (vvor) i	-evel ivio	THEOTH	5 Nequirer	iieiits	

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements.

Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Schedule Generation Date: 4/3/2024

Page 4

	Conne	•	artment of						ection	
		Water Qu	ality Monit	oring and						
PWS ID CT1000094	PWS Nam	e CCAMPGROUND			Cla	assificat NC		ulation Ov ,250	vner Type Pr	imary Source GW
Local Address (where appli	cable)		Service	Residential	Comm	nercial I	Industrial	Combined	Agricultura
360 NORFOLK I		•		Connections		1	1			
Towns Served:	NORTH CAN	IAAN								
Water System	n Facility: I	ENTRY POINT W	/ELL #1 & WELL	#2 (WSFID: 0	0700)					
Analyte			uirement (Summ	-	-	ing Limi	t		Samples Re	a/Month
Chlorine			rine Residual Moi		_	_			Dai	-
Start Date:	1/1/2006			= -	nce History		-	in a lineit	Monitor	-
Start Bate.	1, 1, 2000			-	ing Period	•	-	ing Limit ance Statu		nce Status:
					23 - 11/30/2	023	Compil	ance State	is	
					23 - 12/31/2					
					4 - 1/31/202					
					4 - 2/29/202					
					4 - 3/31/202					
Water System	n Facility: I	ENTRY POINT W	/ELL #3 (WSFID:		. 3,31,202	•				
Analyte	Tracincy.		uirement (Summ	-	Operat	ina Limi	+		Samples Re	a/Month
Chlorine					_	_			-	-
	1 /1 /2006	Entry Point Chic	rine Residual Mor	= -	nce History		-		Dai	-
Start Date:	1/1/2006			-	ing Period	•	-	ing Limit	Monitor	ing nce Status:
					_	022	Compli	ance Statu	is: Compila	ice Status.
					23 - 11/30/2					
					23 - 12/31/2					
					4 - 1/31/202 4 - 2/20/202					
					4 - 2/29/202 4 - 2/24/202				<u> </u>	
M/11 C I	e e e e e e	ENTRY POINT	A/ELL // // //A/CELE		4 - 3/31/202	.4				
-	i Facility: 1		WELL #4 (WSFID	-						
Analyte			uirement (Summ		-	ing Limi			Samples Re	-
Chlorine		Entry Point Chlo	rine Residual Moi				MG/L		Dai	ly
Start Date:	6/1/2005			-	nce History	:		ing Limit	Monitor	•
					ing Period		Compli	ance Statu	is: Complia	nce Status:
					23 - 11/30/2					
					23 - 12/31/2					
					4 - 1/31/202					
					4 - 2/29/202					
					4 - 3/31/202					
			Other C	ompliance	Schedul	es				
Compliance Sci	hedule Activ	vity			Due	e Date		Achieve	d Date	
SEASONAL STA	RT UP COM	PLETION			4/1	/2024				
		Water	System Facili	ity and Sar	npling Po	oint Ir	nvento	ry		
Water	han Coast	·	Constitute D. C.	Comment than 10 th	4		Total	Lead an		a -
*	ter System F	acility	Sampling Point ID	Sampling Poil Description	nt		Coliform			Stage
Facility ID	TOLDUITION O	VCTER &		•	L CVCTC* *	Status ^		Kule IIE	er Asbestos	WUP Z DBP
00600 DIST	TRIBUTION S	751 FIVI	4	DISTRIBUTION		A	Υ			
			DOWNSTREAM		VICE CON	A				
			LONEOAK 001	SITE 587		Α	Υ			

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Υ

Υ

Α

LONEOAK 002 SITE 219

LONEOAK 003 SITE 708

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1000094	LONE OAK CAMPGROUND			NC	1,250	Р	GW
Local Address (where applicable)		Service	Resider	itial Commer	cial Industr	al Combine	ed Agricultural
360 NORFOLK	ROAD	Connections		1			

Towns Served: NORTH CANAAN

Water System Facility and Sampling Point Inventory											
Water					Total	Lead and					
System	Water System Facility		Sampling Point		Coliform	Copper			Stage		
Facility IE)	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2	2 DBPR		
		LONEOAK 004	SITE T 1	Α	Υ						
		LONEOAK 005	SITE 587	Α	Υ						
		LONEOAK 006	MAIN BATHROOM	Α	Υ						
		LONEOAK 007	SITE 200	Α	Υ						
		LONEOAK 008	LAUNDRY	Α	Υ						
		LONEOAK 009	SITE 516	Α	Υ						
		LONEOAK 010	SITE 618	Α	Υ						
		LONEOAK 011	SITE 517	Α	Υ						
		LONEOAK 012	SITE N 9	Α	Υ						
		LONEOAK 013	SITE 680	Α	Υ						
		LONEOAK 014	SITE 528	Α	Υ						
		LONEOAK 015	SITE T 6	Α	Υ						
		LONEOAK 016	SITE 001	Α	Υ						
		LONEOAK 017	SITE 635	Α	Υ						
		LONEOAK 018	SITE 49	Α	Υ						
		LONEOAK 019	SITE T 22	Α	Υ						
		LONEOAK 020	SITE 505	Α	Υ						
		UPSTREAM	WITHIN 5 SERVICE CON	Α							
00700	ENTRY POINT WELL #1 & WELL	3	ENTRY POINT WELL #1	Α							
00701	ENTRY POINT WELL #3	3	ENTRY POINT WELL #3	Α							
00702	ENTRY POINT- WELL #4	3	ENTRY POINT WELL #4	Α							
21768	WELL #1	2	WELL #1	А							
21769	WELL #2	2	WELL #2	Α							
21770	WELL #3	2	WELL #3	Α							
21771	WELL #4	2	WELL #4	Α							
50504	TREATMENT PLANT- WELL #4										
57280	TREATMENT PLANT- WELL #3										
57282	TREATMENT PLANT- WELL #1 & WELL #2										

				Contact Inf	ormation				
Name				Organization	1			Job Title	
Mr. Barry Brown	Barry Brown Lo				mpground	President			
Mailing Address Line One Mailing Addr				dress Line Two	ress Line Two			State	Zip Code
360 Norfolk Road			P O Box 64	0 East Canaan CT			06024		
Business Phone	Extension	Fax	ľ	Mobile Phone	Emergency Phone	Email Ad	ddress	,	
860-824-7051		860-824-2	1585		203-982-5439	LONEOAKINC@AOL.COM			
Contact Role(s): O	wner								

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

(Lonnectic	ut Departm	ent o	of Public	Health	Drii	nking	Water	Section	
	Wat	ter Quality I	Moni	toring a	nd Con	nplia	nce S	chedul	le	
PWS ID	PWS Name					Classif	fication	Population	Owner Type	Primary Source
CT1000094	LONE OAK CAMI	PGROUND				NC		1,250	Р	GW
Local Address (wh	ocal Address (where applicable)				Resider	tial Commercia		al Industri	al Combin	ed Agricultural
360 NORFOLK RO	AD			Connection	ıs		1			
Towns Served: NO	ORTH CANAAN			,	'				'	,
Name			(Organization					Job Titl	е
Mr. Peter J. Brow	/n		L	oan Oak Cam	pground	round Vp				
Mailing Address L	ine One	Mailin	g Addre	ss Line Two				City	State	Zip Code
360 Northfolk Ro	ad	РОВо	x 640				East Ca	naan	СТ	06024
Business Phone	Extension	Fax	Mol	oile Phone	Emergency	/ Phone	Email A	ddress	,	
860-824-7051		860-824-1585			860-833	-7870	pete@l	oneoakcam	psites.com	
Contact Role(s):	Administrative	Contact, Legal Cont	act. Ow	/ner			1			

A --- A - CD | bli - H - blb D - bli - MA-4 - C - ali-

Contact Role(s): Administrative Contact, Legal Contact, Owner

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	C	4 - CDl-1: - II	[] _]	D		_ TA	7-4	C			
	Connecticut Departmen				•				ection		
	Water Quality Mo	onitoring and	d Con								
	PWS Name			Clas		Pop		Ow	ner Type	Pri	mary Source
	FREUNDS FARM MARKET & BAKERY				NC		43		Р		GW
Local Address (w		Service	Residen	tial	Commerci	ial	Industri	al	Combine	ed	Agricultura
324 NORFOLK RO	DAD	Connections							3		
Towns Served: N	ORTH CANAAN							_		_	
	Mo	onitoring Requ	iireme	nts							
Water System I	Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)									
Total Coliform	(3100)						1	rou	utine (R1) p	er quarter
Sampling Po	oint (Sampling Point ID)		Monitori	ng P	eriod C	Colle	ction Pei	riod	Com	plia	nce Status
Select from	Inventory of Active Sampling Points	:	10/1/23 -	12/3	31/23					Con	plete
			1/1/24 -	3/3	1/24						
			4/1/24 -	6/30	0/24						
			7/1/24 -	9/30	0/24						
Physical Paran	neters (PPS)						1	rou	utine (R1	T) p	er quarter
Sampling Po	oint (Sampling Point ID)		Monitori	ng P	eriod C	Colle	ction Pei	riod	Com	plia	nce Status
Select from	Inventory of Active Sampling Points	:	10/1/23 -	12/3	31/23					Con	plete
			1/1/24 - 3/31/24								
			4/1/24 -	6/30	0/24						
			7/1/24 -	9/30	0/24						
Water System I	Facility: ENTRY POINT - MARKET V	VELL (WSF ID: 007	00)								
Nitrate (1040)							1	rou	utine (R1	T) p	er quarter
Sampling Po	oint (Sampling Point ID)		Monitori	ng P	eriod C	Colle	ction Pe	riod	Com	plia	nce Status
EP - MARKE	T WELL (3)		10/1/23 -	12/3	31/23						
			1/1/24 -	3/3	1/24						
			4/1/24 -	6/30	0/24						
			7/1/24 -	9/30	0/24						
Nitrite (1041)								1	routine	(RT) per year
Sampling Po	oint (Sampling Point ID)		Monitori	ng P	eriod C	Colle	ction Pe	riod	Com	plia	nce Status
EP - MARKE	T WELL (3)		1/1/23 -	12/3	1/23				1	Con	plete
			1/1/24 -	12/3	1/24						
			1/1/25 -	12/3	1/25						
Water System I	Facility: MARKET WELL	(WSF ID: 59)	762)								
E. Coli (3014)							1	rou	utine (R1	T) p	er quarter
Sampling Po	oint (Sampling Point ID)		Monitori	ng P	eriod C	Colle	ction Pei		-		nce Status
MARKET WI	ELL (2)		10/1/23 -	12/3	31/23					Con	plete
			1/1/24 -	3/3:	1/24						
			4/1/24 -	6/30	0/24						
			7/1/24 -	9/30	0/24						
	Public	Notification R			·						
		Compliance	Notice		<u>Public N</u>	lotifi	cation		PN C	ertif	ication
Violation/Situat	ion	Period	Tier		Required		erforme	d L	Due to DF		Received
E. Coli		7/10/16 - 9/13/16	3	(6/26/2018	3			7/6/2018	3	
	Water System F	acility and Sar	npling	Po	int Inve	ento	ory				

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

DISTRIBUTION SYSTEM

Description

Sampling Point Sampling Point

ID

4

Water

Facility ID

System Water System Facility

DISTRIBUTION SYSTEM

Total

Rule

Status

Α

Coliform Copper

Lead and

Stage

Rule Tier Asbestos WQP 2 DBPR

	Water Quality Mo	onitoring and	d Con	npl	iance S	Schedul	e	
PWS ID PWS Name					ssification	Population	Owner Type	Primary Source
CT1000234	FREUNDS FARM MARKET & BAKERY				NC	43	Р	GW
Local Address	Service	Residential		Commerci	al Industri	al Combine	d Agricultural	
324 NORFOLK	ROAD	Connections					3	

Connecticut Department of Public Health Drinking Water Section

Towns Served: NORTH CANAAN

	Water System Facility and Sampling Point Inventory								
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos		age DBPR
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT - MARKET WELL	3	EP - MARKET WELL	Α					
59762	MARKET WELL	2	MARKET WELL	Α					
59770	TREATMENT PLANT								

			Co	ontact Info	ormation					
Name				Organization			Job Title			
Mr. Benjamin Freu	nd									
Mailing Address Line One Ma			Mailing Addr	Mailing Address Line Two		City		State	Zip Code	
PO Box 636						East Can	aan	СТ	06024	
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Address				
860-824-0650			86	0-824-7524						
Contact Role(s): Le	gal Contact		·							
Name				Organization			Job Title			
Ms. Theresa Freund	t									
Mailing Address Line One Mailing			Mailing Addr	ng Address Line Two			City	State	Zip Code	
324 Norfolk Rd						North Ca	ınaan	СТ	06018	
Business Phone	Extension	Fax	Мо	bile Phone	Emergency Phone	Email Address				
860-824-0650						theresa.h.freund@gmail.com				
Contact Role(s): O	wner									
Name				Organization			Job Title			
Mr. Matthew Freur	nd									
Mailing Address Line One Mailing Add				ess Line Two		City	State	Zip Code		
324 Norfolk Rd PO Box 636			PO Box 636			East Canaan		СТ	06024	
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Address		,		
860-824-7524					203-982-9046	matt@cowpots.com				
Contact Role(s): Ac	dministrative Co	ntact, Ow	ner		•	•				

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule